

PART B - ISSUE FEE TRANSMITTAL

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126389 TM34/07/02
CHRISTENSEN, O'CONNOR, JOHNSON, KINDNESS
1420 FIFTH AVENUE
SUITE 2800
SEATTLE WA 98101-2347

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I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Sheila B. King

(Depositor's name)

Sheila B. King

(Signature)

September 21, 2001

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/369,960	08/06/99	043	CORRIELUS, J	2172 07/02/01
First Named Applicant	CAMPBELL, 35 USC 154(b) term ext. = 0 Days.			

TITLE OF INVENTION ON-LINE DATABASE UPDATING NETWORK SYSTEM AND METHOD

ATTYS DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 KANG113878	707-010.000	147	UTILITY	NO	\$1240.00	10/02/01

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Christensen O'Connor

Johnson Kindness PLLC

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Punch Networks Corporation

(B) RESIDENCE (CITY & STATE OR COUNTRY)

Seattle, Washington

Please check the appropriate assignee category indicated below (will be printed on the patent)

☐ Individual☒ corporation or other private group entity☐ government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

☒ Issue Fee☒ Advance Order - # of Copies 5

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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

Mary L. Cullen

Reg. No. 40,574

(Date)

09/21/01

NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney, or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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09/25/2001 CDM2

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